BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	Bouak	mi	0// //	
O.I.P.E. CLASSIFIER			5-9-16	
FORMALITY REVIEW	1 M	JEBBU	11411	
RESPONSE FORMALITY REVIEW	740	IW	St-1-01	
			- Total	

INDEX OF CLAIMS

Rejected	N Non-elected
= Allowed	Interference
 (Through numeral) Canceled 	А Аррва!
÷ Restricted	O Objected

Claim	Date	Claim		Date	Claim	D
18 18 3 3 N						Date
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6		56		╼╁╌╂┈┼╌╂╌╂	106	┖╏╸┞╼╋╌┠╼╅┈╏═╏╶╬╴╏╸
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9		59	┪╸ ┧╼╉┈┤	╼╂╾╂┈╂┈╂	109	╏╶┞╸╏┈┟┈╏╶╏┈┟┈╏┈ ╏
10		60	┦╌╏╌╏╍ ┤	╼┼┼┼┼	110	┞╸┠┈╂┈╂┈╂┈╂┈╏┈╏ ┈╏
11		61	† 	─┤╼┝╍┠╺┡╍╏	111	┖╏╌╏╌╏┈╏╼┩┈╏═┩
12	~}~∮─ ∮─}	62	 	╌┟┈┨╌┨┈╏	112	╃╌┋╍┋╼┋╍╏ ╌┇╌┇╌┇╌┇
13		63	╆═╅╌╁═╂	╼ ╏╸╏┈╏╸╏╸╏	→	╎┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋
14 11 11	 	64	╿╌ ┠╌┞╌┤	╌╂╌╂╌╂╍╂╌╂╸	113	┞╸┞╶┞┉╏╼╏┈ ╁┈ ╏ ┈╏
15	┤╸ ┤╶ ╏╶╏╸ ┤ ├	65	╁╂╌╂╼╉	╼┼╼┼╼┼╼╂╌╂	114	┦╌╿╍┩╍╏╶╏ ╶╏
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If more than 150 claims or 10 actions staple additional sheet here

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